

Appl. No. 10/654,668
Reply Dated February 22, 2007
Reply to Office Action Mailed December 7, 2006



Express Mailing Label No.:
EV 929476833 US

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appl. No.: 10/654,668 Confirmation No.: 5368
Applicant: Brian A. Rosenfeld, M.D. and Michael Breslow, M.D.
Filed: September 4, 2003
Group Art Unit: 3626
Examiner: MORGAN, Robert W.
Docket No.: 2483-001CIP1

MAIL STOP AF
Commissioner for Patents
PO Box 1450
Alexandria, VA 22313-1450

INTERVIEW SUMMARY PURSUANT TO 37 C.F.R. § 1.133

Dear Sir:

On February 21, 2007, a telephonic interview was conducted in which Examiner Robert Morgan participated for the Patent and Trademark Office and Jon Roberts participated for Applicant. A proposed amendment after final rejection was discussed, which Applicant's attorney agreed to submit as soon as possible. Agreement on claims was not reached.

Respectfully Submitted,

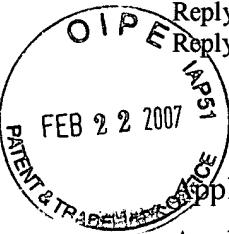
Jon L. Roberts, Ph.D., J.D.
Registration No. 31,293
Elliott D. Light, Esq.
Registration No. 51,948
Roberts Mardula & Wertheim, LLC
11800 Sunrise Valley Drive, Suite 1000
Reston, VA 20191
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02-23-07

AKG

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TRANSMITTAL LETTER

MAIL STOP AF
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

Enclosed please find:

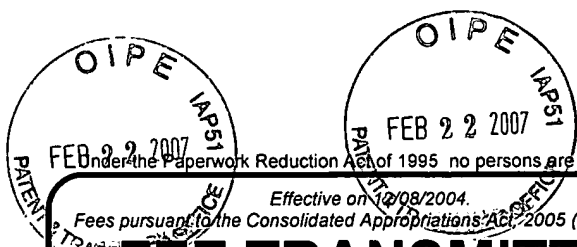
1. An Amendment responsive to the Office Action mailed December 7, 2006;
2. Five Terminal Disclaimers; and
3. A check in the amount of \$325.00 in payment of the terminal disclaimer fees.

The Director of the U.S. Patent and Trademark Office is hereby authorized to charge any fee deficiency, and conversely credit any overpayment to Deposit Account No. 18-1579. A duplicate copy of this letter is enclosed.

Respectfully submitted,

A handwritten signature in black ink, appearing to read "Jon L. Roberts".

Jon L. Roberts, Ph.D., J.D.
Registration No. 31,293
Elliott D. Light, J.D.
Registration No. 51,948
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PTO/SB/17 (07-06)

Approved for use through 01/31/2007. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Effective on 12/08/2004.

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL

For FY 2006

☐ Applicant claims small entity status. See 37 CFR 1.27TOTAL AMOUNT OF PAYMENT (\$)**325.00****Complete if Known**

Application Number	10/654,668
Filing Date	09/04/2003
First Named Inventor	Brian A. Rosenfeld, M.D.
Examiner Name	Robert W. Morgan
Art Unit	3626
Attorney Docket No.	2483-001CIP1

METHOD OF PAYMENT (check all that apply)☒ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____☐ Deposit Account Deposit Account Number: _____ Deposit Account Name: _____

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below☐ Charge fee(s) indicated below, except for the filing fee☒ Charge any additional fee(s) or underpayments of fee(s)
under 37 CFR 1.16 and 1.17☒ Credit any overpayments

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

FEE CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES**Fee Description**

Each claim over 20 (including Reissues)

Fee (\$)	Small Entity Fee (\$)
50	25

Each independent claim over 3 (including Reissues)

200	100
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Multiple dependent claims

360	180
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Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
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- 20 or HP = _____ x _____ = _____

HP = highest number of total claims paid for, if greater than 20.

Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
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- 3 or HP = _____ x _____ = _____

HP = highest number of independent claims paid for, if greater than 3.

Multiple Dependent Claims

Fee (\$)	Fee Paid (\$)
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3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
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- 100 = _____ / 50 = _____ (round up to a whole number) x _____ = _____

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Fees Paid (\$)

Other (e.g., late filing surcharge): Terminal Disclaimers (5)

\$325.00**SUBMITTED BY**

Signature		Registration No. (Attorney/Agent) 31,293	Telephone (703) 391-2900
Name (Print/Type)	Jon L. Roberts, Ph.D., J.D.		Date February 22, 2007

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.